Health, Safety, Environment, Training, Medical and Emergency Services

EMAIL

Date:	June 19, 2019					
EWAIL:	ADEC Air Quality Management Division (dec.aq.airreports@alaska.gov)					
From:	Brad Broker (907) 659-7242 NS Environmental Coordinator					
Number of Pages including Cover <u>3</u>						
Comments:						
Vaccinacionacion	x Permit Deviation – April 30, 2019					
Excess Emission						
Attached please find a Permit Deviation report for Permit Number AQ0267TVP01 that occurred on April 30, 2019.						
Please contact me with any questions.						

FILE - 9.7b PC Docs

Section 20. ADE	EC Notification	on Form			
Fax th	is form to: (907	') 451-2187	Telephone:	(907)	451-5173
ConocoPhillips Alaska, In Company Name	C.				
uparuk Central Producti acility Name	on Facility #1				
Reason for notificat					
☐ Excess Emission		⊠ Other Devi		'ermit	Condition
you checked this bo ill out section 1		If you checked this box fill out section 2			
Vhen did you discove Date: 6/14/201			Other Deviat	ion:	
ection 1. Excess E	missions				
(a) Event Info	ormation (Use	e 24-hour cloc END Time:	k):	Durat	tion (hr:min):
				Total	
Attach a detailed conditions exceed (c) Sources In Identify each emission of the event. Attach additional except.	nvolved: ssion source inv ne permit. List a	olved in the even ny control device	t, using the san	ne iden	tification number
Source ID No.	Source Name			9	Control Device
140.					
	ssion standard p ed injuries or he h additional shee	otentially exceed alth impacts. Ide	ed during the e ntify what obse		Attach a list of ALL or data prompted Emissions Observe
					.,,,
(e) Excess En Attach a descripti event. (f) Corrective Attach a descripti	on of the measu Actions:	res taken to mini			nissions during the
and to minimize o					
					Page 1 of 2

Date: April 28, 2003 Expires: May 27, 2008

(g) Unavoidable Emissions:

Do you intend to assert that these excess emissions were unavoidable?

NO

Do you intend to assert the affirmative defense of 18 AAC 50.235?

YES

Section 2. Other Permit Deviations

(a) Sources Involved:

Identify each emission source involved in the event, using the same identification number and name as in the permit. List any control device or monitoring system affected by the event. Attach additional sheets as necessary.

Source ID No. Source Name N/A

N/A

Description

Stationary source

N/A

(b) Permit Condition Deviation:

Identify each permit condition deviation or potential deviation. Attach additional sheets as necessary.

Permit Condition	Potential Deviation		
10.4. Report using the operating report under condition 88, the monthly fuel consumption (MMscf/month for gas-fired emission units and gallons/month for liquid fuel-fired emission units) for each emission unit group (turbines, heaters, engines, flared, incinerators, drill site heaters, drill rig engines, drill rig heaters and boilers, rig camp engines, well service heaters, well service engines, and well frac unit engines), and the stationary source total fuel consumption, for each month covered by the reporting period.	The monthly fuel consumption for each emission unit group was submitted as required; however the stationary source total fuel consumption for each month was not included in the operating report submitted on April 30, 2019 for the January 1 through March 31, 2019 reporting period.		
88.1. The operating report must include all information required to be in operating reports by other conditions of this permit.	CPAI did not include all the information required by Condition 10.4 of the permit.		
90. The Permittee must comply with each permit term and condition.	CPAI did not comply with each permit term and condition.		

(c) Corrective Actions:

Attach a description of actions taken to correct the deviation or potential deviation and to prevent recurrence.

The reporting tool has been updated to include this information on the report, and the report review procedure has been updated to verify this information is included. The missing data will be submitted with the operating report for the April 1 through June 30, 2019 reporting period.

Based on information and belief formed after reasonable inquiry, I certify that the statements and information in and attached to this document are true, accurate, and complete.

Dennis Melton

Printed Name: